| IIIA | (Under 37 CFR 1.97(b) or 1.97(c)) ——Docket No. WLJ.056 | | | | | | | | | |
|--|--|--|--------------------------------|-----------|--|------------------|--------------|------------------------|--|--|
| In Re | Applica | ation Of: Jyoti I | Kiron BHARDWAJ | et al. | |) | J | #6 | | |
| Serial No. Filing Date 09/601,958 08/10/2000 | | | | - | Ahmed | Examiner UNKNOWN | - | Group Art Unit | | |
| Title: | PLAS | SMA PROCESSI | NG APPARATUS | PE. | 200 20 JUNE OF TOTAL OF THE OF | | RE | CEIVED | | |
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| 37 CFR 1.97(b) | | | | | | | | | | |
| 1. 🛚 | · · | | | | | | | | | |
| | | | | 37 CF | FR 1.97(c) | | | | | |
| 2. | The Information Disclosure Statement submitted herewith is being filed after three months of the filing of a national application, or the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; or after the mailing date of a first Office Action on the merits, whichever occurred last but before the mailing date of either: | | | | | | | | | |
| | | 1. a Final Action under 37 CFR 1.113, or | | | | | | | | |
| | 2. a Notice of Allowance under 37 CFR 1.311, | | | | | | | | | |
| | whichever occurs first. | | | | | | | | | |
| | Also submitted herewith is: | | | | | | | | | |
| | a certification as specified in 37 CFR 1.97(e); | | | | | | | | | |
| OR | | | | | | | | | | |
| | | the fee set fortl under 37 CFR 1 | th in 37 CFR 1.17(1.97(c). | (p) for s | ubmission | of an Informa | ation Disclo | osure Statement | | |

| | SURE STATEMENT (c) | Docket No. WLJ.056 | | |
|---|--|---|------------------------|--|
| In Re Application Of: J | yoti Kiron BHARDWAJ et al. | | | |
| Serial No. 09/601,958 | Filing Date 08/10/2000 | Examiner UNKNOWA | Group Art Unit 1734 | |
| Title: PLASMA PROC | ESSING APPARATUS | OCT 1 9 2000. ES | | |
| as described belo Charge th Credit any Charge an Certificate of T I certify that this d deposit account is bein States Patent and Trade) on (Date) *This certificate may deposit account. | ount of is attached and is attached with a duplicate copy of this sheet the amount of an overpayment. The additional fee required. Transmission by Facsimile* Transmission by Facsimile* Transmission by Facsimile and authorization to charge the facsimile transmitted to the United and Emark Office (Fax. No.) Signature Transmission by Facsimile and authorization to charge the facts and authorization the facts and auth | ched. o charge and credit Deposit Account No. 0, 2000. | | |
| cc: | | | | |

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